

Date: 12/2/13

## **Iowa Department of Human Services**

Terry E. Branstad Governor

Kim Reynolds Lt. Governor

Charles M. Palmer Director

Marlene Ackiss 1319 E 15<sup>th</sup> St

Des Moines, IA 50316

Dear Marlene,

This letter is in regards to the 11/27/13 compliance check of your Category C-1, Registered Child Development Home. Iowa Code Chapter 237A and 441 Iowa Administrative Code. Chapter 110. describes specific requirements that must be met by a Registered Child Development Home. The following areas were out of compliance at the time of my visit:

| 110.5(1)b All medicines and poisonous, toxic, or otherwise unsafe materials are secured from access by a child. (You need to install child safety locks on your lower kitchen cabinet or move your cleaning supplies out of reach of children.)  |
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| 110.5(1)h A safe outdoor play area is maintained in good condition throughout the year. (You need to install spring covers and safety nets on your trampoline, or flip it over/remove it from the yard during any childcare hours.)  |
| 110.5(1)j Emergency and disaster plans for fire and tornado are written and posted by primary and secondary exits. (You need to post an emergency/disaster plan next to your front and back door. This plan should include a map of your main level and clearly mark all fire/tornado exits/locations.)  |
| 110.5(1)j The plans shall clearly map building evacuation routes in case of fire, a safe place indoors in case of tornado, and flood shelter areas.  |
| 110.5(1)n Has a minimum of one single-station, battery-operated, UL-approved smoke detector in each child-occupied room and at the top of every stairway. (You need to install an additional battery operated smoke detector in your back bedroom.)  |
| 110.5(1) o Nonsmoking signs posted at every entrance of the home and in every vehicle used to transport children. Signs include telephone # for reporting complaints, and <a href="https://www.iowasmokefreeair.gov">www.iowasmokefreeair.gov</a> . (You need to post the two no-smoking signs I shared with you next to the front and back door.) |
| 110.5(8) Children's Files  |
| 110.5(8) a Identifying information including, at a minimum, the child's name, birth date, parent's name, address, telephone number, special needs of the child and the parent's work address and   |

telephone number. (You need to update your children's files with the Child Intake Form, the

| statements of health for each of the two children.)   | i, and get some updated physician signed  |  |
|---|---|--|
| 110.5(8)b Emergency information including where the parent can be reached, the name, street address, city and telephone of the child's regular doctor, and the name number, telephone number, and relationship to the child of another adult available in case of emergency.  |   |  |
| 110.5(8)c A signed medical consent from the pa  | arent authorizing emergency treatment.  |  |
| 110.5(8)f A list signed by the parent which name telephone number, and relationship to the child.   | es persons authorized to pick up the child, their   |  |
| 110.5(8)h For each school-age child, record of a physical exam completed at the time of school enrollment or since.   |   |  |
| Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration. Please take whatever steps are necessary to completely address each of the violations noted above. It is essential you correct all above-mentioned violations on or before |   |  |
| Based on the items out of compliance listed above, necessary. However, it is essential you come into comregulatory mandates. Please check mark each of the corrections have been completed. By doing so, you mandated regulatory requirements contained within  | plete compliance with all Departmental boxes listed above when the necessary certify that you have completed all of the |  |
| I certify that I have taken all of the steps necessary<br>noted above and am now in complete compliance w<br>regulatory rules.  |   |  |
| Please sign and date below, and return this form in the provided envelope by: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\   |   |  |
|   |   |  |
| X   |   |  |
| Signature   | Date  |  |
| Please call me if you have any further questions.   |   |  |
| Sincerely,  |   |  |
| Fail Crow   |   |  |

Earl Crow

Child Development Home Compliance Checks DHS, Story County

## (515) 268-7106

## Always Remember:

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at 1-800-722-7619.

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to <a href="http://www.dhs.state.ia.us/Consumers/Child\_Care/Professional\_Development.html">http://www.dhs.state.ia.us/Consumers/Child\_Care/Professional\_Development.html</a> and you can sign up for training at <a href="https://ccmis.dhs.state.ia.us/trainingregistry/">https://ccmis.dhs.state.ia.us/trainingregistry/</a>

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).